Village of Johnstown Administrative Offices www.johnstownohio.org

## VILLAGE OF JOHNSTOWN, OHIO

599 S. Main Street Johnstown, Ohio 43031 Telephone: 740-967-3177 Fax: 740-967-3519



## Variance Application

Application Number:			
Fees: Number of Certified letters to contiguous property owners:@ \$6.70 = Newspaper advertising, for two weeks: Fee:  Circle one: Base fee Single Family Residence: \$200 Base fee All Other Uses: \$500			
Total fee amount:	Paid:	Check/cash:	
The undersigned is applying for a Variance for the following use; said permit to be issued on the basis of the information contained within this application. The applicant hereby certifies that all information and attachments to this application are true and correct and agrees to follow all applicable regulations, refer to <b>Ordinance 1181</b> .			
Applicant Name:		Phone:	
Mailing Address		City:	
Email address:			
Property address:		Johnstown, Ohio	
Zoning District:			
Ordinance(s) the Variance Applies to:			
Description and nature of Variance request:			

## In addition, the following items must accompany this application:

1. A set of to scale plans and plat showing all dimensions of lot, building and improvements.

2. Attach a separate list of property owner's names and addresses contiguous to and directly across the streets(s) from the property for which the Variance is proposed or desired and the mailing addresses of all such persons.

Attach your response to the following practical difficulties test questions.

- 1. Whether the property in question will yield a reasonable return or whether there can be any beneficial use of the property without the variance;
- 2. Whether the variance is substantial;
- 3. Whether the essential character of the neighborhood would be substantially altered or whether adjoining properties would suffer a substantial detriment as a result of the variance;
- 4. Whether the variance would adversely affect the delivery of government services (e.g., water, sewer, garbage)
- 5. Whether the property owner purchased the property with knowledge of the zoning restriction;
- 6. Whether the property owner's predicament feasibly can be obviated through some method other than a variance;
- 7. Whether the spirit and intent of the Code would be observed and substantial justice done by granting the variance.

I certify the information contained in this application and attachments is true and accurate.

Applicant's signature:Date:Date:
Office use only Date received in office:/by:
Planning and Zoning Commissioners hearing date:/
Permit was approved issued on date:/
Permit was denied on date:/
Commission Chairperson Signature:
Additional comments or requirements:
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<sup>&</sup>quot;No single factor controls a determination of the practical difficulties test."